

LICENSE APPLICATION—THREE-YEAR SHORT-TERM SUBSTITUTE PERMIT

PI-1602-SP (Rev. 11-05)
Page 1

FOR INFORMATION CONTACT:

Telephone No. (608) 266-1028
Voice Mail No. 1-800-266-1027
Web Site dpi.wi.gov/tepd

We do not accept applications by FAX.

WE WANT TO DO AN EXCELLENT JOB FOR YOU. HERE IS HOW YOU CAN HELP.

- ◆ Use the correct form. The PI-1602-SP form is used only to apply for or renew a three-year short term substitute permit for applicants who **did not** complete a state-approved educator training program. This license must be requested by an employing school district and is only valid for short-term substitute assignments (20 consecutive days or less). For more information, go to: dpi.wi.gov/tepd/bssub.html
Do not use this form to apply for an emergency long-term (more than 20 consecutive days in one assignment) substitute license. Use the PI-1602-EL form instead.
- ◆ Type or print legibly in black or blue ink. Do not submit “back-to-back” photocopies since pages of the application are separated during processing. **Keep a copy of your entire application including all documentation** since no documents can be returned to you.
- ◆ Mail **all** necessary documentation and forms, including the PI-1602-A Conduct and Competency Review (and fingerprint cards if applicable), along with the application in one complete submission. This will facilitate much faster processing of your application.
- ◆ Verify the date that the application was received at DPI by checking the license database at: dpi.wi.gov/tepd/lisearch.html

LICENSE APPLICATION INSTRUCTIONS

- I. **Applicant Information:** Fill in all boxes. “Primary Phone” is a number to contact you from 8 a.m. to 4 p.m. Central Standard Time.
- II. **Applicant Status, Degree Information, and District Request**
- Part A**—Indicate whether this is a first time or renewal request.
- Part B**—For first time requests provide bachelor’s degree information and indicate status of transcripts. Note: Accreditation of institutions of higher education may be verified on the Department of Education Office of Postsecondary Institutions website:
<http://ope.ed.gov/accreditation>.
- III. District request and signature is required for ALL requests.

PAYMENT INSTRUCTIONS

Fee payment (\$100.00) must be mailed with your application. Since fees cover the cost of application review and processing, **NO REFUNDS WILL BE MADE**, regardless of whether or not a license is issued. The application fee is subject to change without notice.

CHECK OR MONEY ORDER: Make payable for **\$100** to: **Dept. of Public Instruction**. *Do not mail this page* (page 1) when paying by check or money order. **Attach the check or money order securely to the front of page 2 (the application page containing your personal information).**

CREDIT CARD: We accept **only** MasterCard or VISA. Fill in the account information below and sign. This credit card payment page must have an *original signature* and will be retained by our bank. Since this page will not be forwarded to our licensing consultants, *be sure that the reverse side does not contain any information* needed to process the application. **Attach this page on top of all other application materials before mailing.**

Account Number



				—					—					—					
--	--	--	--	---	--	--	--	--	---	--	--	--	--	---	--	--	--	--	--

Expiration Date

Month — Year

Amount

\$100

Print or Type Cardholder Name

Signature

**MAILING INSTRUCTIONS (Do not FAX.)**

All application materials and payment must be mailed (regular 1st class U.S. mail only) to DPI's bank for payment processing before the application can be reviewed. The bank then couriers application materials to Madison for processing by licensing consultants. **Do not mail or fax applications to DPI's Madison office. If sent to Madison, review of your application will be significantly delayed.**

All applicants must mail the application packet to:

DPI Teacher Licensing, Drawer 794, Milwaukee, WI 53293-0794



Wisconsin Department of Public Instruction

**LICENSE APPLICATION—THREE-YEAR
SHORT-TERM SUBSTITUTE PERMIT**

PI-1602-SP (Rev. 11-05)

Page 2

FOR INFORMATION CONTACT

Telephone No. (608) 266-1028

Voice Mail No. 1-800-266-1027

Web Site dpi.wi.gov/tepd

Collection of Social Security Number is a requirement of s.118.19(1m).
Application forms are available at: dpi.wi.gov/tepd/applications.html

I. APPLICANT INFORMATION

Legal Name <i>First</i>	<i>Middle</i>	<i>Last</i>		
Previous Name(s)		Social Security Number	Date of Birth <i>Mo./Day/Yr.</i>	
Address			P.O. Box	
City		State	Zip Code	Zip Plus <i>4 digits</i>
Primary Telephone <i>(include area code)</i>	Ext.	Alternate Telephone <i>(include area code)</i>	Ext.	
Email Address				

II. APPLICANT STATUS, DEGREE INFORMATION, AND DISTRICT REQUEST**Applicant completes Part A & B**

Check the applicable box(es). Respond to all questions and provide all requested information and attachments.

PART A—This three-year short-term request is a:☐ First time request (answer Part B and obtain district request in Section III) ☐ Renewal request (skip to Section III and obtain district request)**PART B—List the following information about your degree:**

Institution Name	Degree	Date <i>Mo./Day/Yr.</i>
------------------	--------	-------------------------

Note: ALL FIRST TIME PERMIT REQUESTS require official transcripts confirming the applicant's bachelor's degree from an institution accredited by an agency recognized by the United States Department of Education.

Transcript Status: ☐ Previously submitted to DPI ☐ Attached
☐ To be mailed separately (Send transcripts mailed later to: DPI—Educator Licensing, PO Box 7841, Madison, WI 53707)

III. SCHOOL DISTRICT REQUEST AND SIGNATURE OF EMPLOYING ADMINISTRATOR

School District Requesting Substitute Permit	Telephone <i>Area/No.</i>	CESA No.	LEA No.
School District Mailing Address <i>Street or PO Box</i>	City	Zip Code	

Signature of Employing Administrator

Your signature confirms that your district has a shortage of fully licensed substitute teachers and that training for substitute teaching will be provided to the applicant.

Name of Employing Administrator <i>Type or print clearly.</i>	Title
Signature of Employing Administrator	Date Signed <i>Mo./Day/Yr.</i>

**For DPI Use Only****For Bank Use Only**☐ FP
☐ Conduct

Amount of Remittance

Date Stamp

\$100

**CONDUCT AND COMPETENCY REVIEW**

PI-1602-A (Rev. 4-03)

Page 1

Application forms are available at: www.dpi.state.wi.us/dlsis/tel/applications.html**ANSWER ALL QUESTIONS**

1. This form **must** be completed and included with your licensing application. Failure to complete this form will delay the processing of your application.
2. **Your signature on this form must be notarized. Most schools have a notary public on staff.**

For purposes of this application, "teaching" applies to all licensed school personnel which includes, but is not limited to, classroom teachers, counselors, social workers, psychologists, administrators, school library media specialists, substitute teachers, special education aides, etc.

<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR* <small>Previously Reported</small>	1. Have you ever been disciplined for alleged misconduct in the course of any employment or as a member of any licensed or regulated profession, including but not limited to verbal, physical, or sexual abuse or harassment?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	2. Have you ever resigned, been disciplined or dismissed from any teaching or other school position, in part, for alleged (check any which apply) <input type="checkbox"/> immoral conduct or <input type="checkbox"/> incompetence <i>Definitions on next page.</i>
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	3. Have you ever had a certificate or license to teach or perform other school duties denied, revoked or suspended?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	4. Is disciplinary action of your educationally related license or employment currently pending in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	5. Have you ever been convicted of violating any civil law, local ordinance, state law, or federal law for actions involving sexual conduct, physical abuse of a child, and/or contributing to the delinquency of a child?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	6. Have you ever been convicted of any criminal offense (including <i>criminal</i> traffic matters, not general traffic violations) in any jurisdiction? (check any which apply) <input type="checkbox"/> felony or <input type="checkbox"/> misdemeanor
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	7. Have you ever participated in a deferred prosecution program resulting from a criminal investigation?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	8. Are you currently on probation in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	9. Have you ever been acquitted or found not guilty of a criminal offense involving sexual conduct or harm or threat of harm to another, for reasons of insanity, mental disease or defect, diminished mental capacity or comparable legal defense or basis?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	10. Is any criminal charge or investigation pending against you in any jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> PR	11. Have you (or a school district where you worked) ever been a party to a civil settlement, award, or agreement of any kind that involved an allegation concerning your conduct as an educator or in an educationally related position?
12. Carefully read item number 2 of the instructions on the following page to determine whether or not you are required to submit fingerprint cards with your license application. Check the appropriate box(es) below to indicate your response.	
<input type="checkbox"/> I am required to submit fingerprint cards with my application. Indicate status of cards below.	
<input type="checkbox"/> Completed cards are enclosed OR <input type="checkbox"/> Cards will be submitted separately.	
<input type="checkbox"/> I am not required to submit fingerprint cards with my application. I understand that I may be required to supply proof that cards are not required at this time.	
For any "Yes" response to questions 1-11, attach a written 8½" x 11" explanation. Submit certified copies of any criminal complaint and if convicted, a copy of the criminal judgment. Also, submit any other relevant court documents pertinent to any of the questions raised.	

*If you have reported a "Yes" response on a previous application, check PR (previously reported) instead of Yes on this application **if no further conviction(s) has occurred.**

IMPORTANT: You must respond to ALL questions 1-12.

UNDER OATH , I swear that all information on this form and the accompanying license application and documentation are true to the best of my knowledge. Any false statements may result in denial, revocation, or suspension of license.	
I HEREBY AUTHORIZE any of my previous employers, law enforcement agencies, and the courts to release, to the Wisconsin Department of Public Instruction, information which pertains to my responses to questions on this form.	
Name <i>Print or type</i>	Sworn and signed before me this ____ day of _____ in the year _____.
Signature (<i>Sign in blue or black ink, in presence of a Notary Public</i>) ➤	_____ Notary Public, _____
Social Security No.**	My commission expires on _____

**Collection of social security number is a requirement of s. 118.19(1m) and (1r). The social security number may be released to the Department of Justice, Department of Revenue, and the Department of Workforce Development. Such information is made available to these governmental agencies for official purposes only.

**INSTRUCTIONS AND DEFINITIONS
CONDUCT AND COMPETENCY REVIEW FORM (PI-1602-A)**

The Conduct and Competency Review Form is a screening method to protect children. While the vast majority of educators are not a danger to the safety and education of our children, there are exceptions to the rule. Some people use the profession to have access to children and to prey upon them. Because of these people, the department must investigate the backgrounds of all license applicants. The questions contained in the conduct and competency review form have been developed to alert the department to cases that warrant further investigation. A “yes” answer to a question or an arrest record **does not** automatically make you ineligible for licensure. Each situation is investigated independently and the final decision is made on a case-by-case basis. Your cooperation in protecting our children is greatly appreciated.

1. **Respond to all questions.** We cannot issue a license unless all questions are answered. Use black or blue ink only. *Submitting a fully and correctly completed form with notarized signature will speed processing of your application.*
2. **Fingerprint Cards:** *Read **ALL** the criteria below carefully. Determine whether fingerprint cards are required in your situation and indicate your response in item 12 of the Conduct and Competency Review.* (If fingerprinting is required, your prints must be prepared on cards obtained directly from the Department of Public Instruction.)
 - If you have worked, resided, or attended college in a state other than Wisconsin, a listed territory (American Samoa, Guam, Puerto Rico, Commonwealth of the Northern Mariana Islands, or Virgin Islands), Canada, or England within the last twenty years after age 17, **you must submit fingerprint cards** with your license application.
 - Even if you previously submitted fingerprint cards to the Department of Public Instruction **you must submit fingerprint cards again if, since the previous submission, you have worked, resided, or attended college in any of the locations listed above.** (If you previously submitted cards that met approved FBI/CIB standards *and* have not worked, resided, or attended college in any of the locations above since submitting your cards to DPI, then new cards are not required.)
 - If your license application contains a non-Wisconsin mailing address, you must submit fingerprint cards unless the following exception applies. If you have never worked, resided, or attended college in a state other than Wisconsin, a U.S. territory listed above, Canada, or England you are not required to submit fingerprint cards.

How to Obtain Fingerprint Cards: To request cards and instructions from DPI, call 1-800-266-1027 or send an e-mail request to tcert@dpi.state.wi.us. Be sure to include your complete mailing address in your request. You will be sent a Federal Bureau of Investigation (FBI) card and a Wisconsin Crime Information Bureau (CIB) card which are preprinted with DPI's code. Your prints must be prepared, by a law enforcement official, on the two cards provided by DPI.

NOTE: Incomplete, or incorrectly prepared cards, will be returned to you for resubmission until they are prepared as specified in the instructions provided. See www.dpi.state.wi.us/dlsis/tel/fphelp.html for instructions on completing the cards correctly, information about fingerprinting services, and an e-mail link for requesting cards from DPI.

3. **Notarization Requirement:** Your signature on the Conduct and Competency form must be notarized. Notary Publics are available at schools, banks, and post offices. Other options include a clerk or deputy clerk of a court of record, a court commissioner, a register or deputy register of deeds, a judge, or a county or deputy county clerk. For more information about notarization see Frequently Asked Questions about notarization at: www.dpi.state.wi.us/dlsis/tel/notary.html.

Definitions

“Immoral Conduct” means conduct or behavior that is contrary to commonly accepted moral or ethical standards and that endangers the health, safety, welfare, or education of any pupil. (Sec. 115.31(1)(c), Wis. Stats.)

“Incompetence” means a pattern of inadequate performance of duties or the lack of ability, legal qualifications or fitness to discharge required duties, and which endangers the health, welfare, safety or education of any pupil. (PI 34.35(1)(d), Wis. Admin. Code)

Reminders

Issuance or renewal of any license or permit by DPI is conditional upon the receipt of a satisfactory background investigation. (Sec. 118.19(10)(e), Wis. Stats.)

All information received from the Federal Bureau of Investigation and the Wisconsin Department of Justice as part of a background check, remains confidential. (Sec. 118.19(10)(f), Wis. Stats.)

You will be notified only if the department determines that the result of the background investigation is unsatisfactory.